IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Mark W. Kroll

Serial No.: Unassigned Art Unit: Unassigned

Filed: Herewith **Examiner:** Unassigned

IMPLANTABLE DEVICE THAT DIAGNOSES ISCHEMIA

AND MYOCARDIAL INFARCTION AND METHOD

Docket No.: A04P1032

INFORMATION DISCLOSURE STATEMENT

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail No.

EV100892552US in an Envelope addressed to:

MAIL STOP - Patent Application

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450,

P.O. Box 1450 Alexandria, VA 22313-1450

MAIL STOP PATENT APPLICATION

Commissioner for Patents

Sir:

Pursuant to 37 C.F.R. § 1.56, 1.97, and 1.98, Applicants submit herewith Form PTO-1449 listing documents believed relevant to the above-identified application. It is respectfully requested that these documents be made of record and that an initialed copy of Form PTO-1449 be returned to the undersigned. A copy of each document is enclosed unless otherwise indicated.

This Information Disclosure Statement is not to be construed as a representation that a search has been made, that additional references material to the examination of this application do not exist, or that the citations listed on Form PTO-1449 necessarily constitute prior art to the application.

Respectfully submitted,

4/12/04

Date

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| Form PTO-1449 (modified) | Attorney Docket No. A04P1032 Serial No. Unassigned | |
|---|---|-------------------------------|
| LIST OF PATENTS AND PUBLICATIONS FOR APPLICANT(S)' INFORMATION DISCLOSURE STATEMENT | Applicant(s): Mark W. Kroll | |
| (Use several sheets if necessary) | Filing Date: Herewith | Group Art Unit: Unassigned |

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| Examiner Initials | Document No. | Date | Name | Class / Subclass | Filing Date |
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Examiner

Date Considered

Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant(s).

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